

Declaration, Power of Attorney, and Petition

As a below named inventor, I/we hereby declare that:

My/Our residence(s), post office address(es) and citizenship(s) is/are as stated below next to my/our name(s),

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: NOVEL HETEROCYCLIC COMPOUNDS, THEIR PREPARATION, PHARMACEUTICAL COMPOSITIONS CONTAINING THEM AND THEIR USE IN MEDICINE, the specification of which (*check one*):

☐ Is attached hereto; or

☒ Was filed on August 10, 2001 as Application Serial No. 09/928,242 and was amended on _____ (if applicable); or
PCT FILED APPLICATION ENTERING NATIONAL STAGE

☐ Was described and claimed in International Application No. _____ filed on _____ and as amended on _____ (if applicable).

I/We hereby state that I/we have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above, and that it contains a full, clear, concise and exact description of the subject matter for which a patent is sought.

I/We acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

Prior Application(s)

☒ (Check if applicable) I/We hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any PCT International Patent Application or foreign application(s) for patent or inventor's certificate listed below:

Prior Foreign Application(s)

<u>711/MUM/2001</u>	<u>INDIA</u>	<u>26/07/2001</u>
(Number)	(Country)	Day/month/year filed
<hr/>		
(Number)	(Country)	Day/month/year filed

☐ (Check if applicable) I/We hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

Prior Provisional Application(s)

(Application Number)

(Filing Date)

(Application Number)

(Filing Date)

(Note: When the nonprovisional application is entitled to an earlier U.S. effective filing date of one or more provisional applications under Title 35, United States Code, § 119(e), a statement such as "This application claims the benefit of U.S. Provisional Application No. _____, filed _____, and U.S. Provisional Application No. _____, filed _____." should appear as the first sentence of the description. In view of this requirement, the right to rely on a prior application may be waived or refused by an applicant by refraining from inserting a reference to the prior application in the specification of the later one.)

☐ (Check if applicable) I/We hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I/we acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a), which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Prior U.S. Application(s)

(Application Serial No.)	(Filing Date)	Status (Patented, pending, abandoned)
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(Application Serial No.)	(Filing Date)	Status (Patented, pending, abandoned)
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☐ (Check if applicable) I/We hereby authorize the U.S. attorneys or agents named herein to accept and follow instructions from _____ as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorneys or agents named herein and myself/ourselves. In the event of a change, I/we will notify in writing the U.S. attorney or agent named herein.

(Check if applicable) In this continuation-in-part application, insofar as the subject matter of any of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I/we acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a), which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

I/We hereby declare that all statements made herein of my/our own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code, § 1001, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

I/we hereby appoint the practitioners named below:

Steven J. MOORE, Reg. No. 35,959;
James W. JAKOBSEN, Reg. No. 38,505; and
Practitioners listed under Customer Number 00909

of the firm PILLSBURY WINTHROP LLP, whose address is Financial Centre, 695 East Main Street, Stamford, Connecticut 06901-6760, as my/our attorneys with full power of substitution and revocation, to prosecute this application and to transact all business in the U.S. Patent and Trademark Office connected therewith.

Please address all written correspondence to the following address:

Steven J. MOORE
PILLSBURY WINTHROP LLP
1600 Tysons Boulevard
McLean, VA 22102

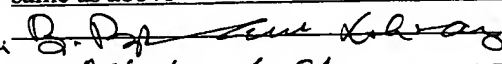
Telephone calls should be directed to Steven J. Moore by dialing 203.965.8254.

Wherefore, I/we pray that Letters Patent be granted to me/us for the invention or discovery described and claimed in the foregoing specification and claims, and I/we hereby subscribe my/our name(s) to the foregoing specification and claims, declaration, power of attorney, and this petition.

Full name of first inventor:
Residence:

LOHRAY, Braj Bhushan
Cadila Healthcare Limited, Zydus Tower, Satellite
Cross Roads, Ahmedabad - 380 015, Gujarat, India
Indian

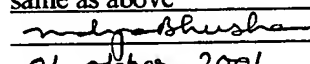
Citizenship:
Post Office Address:
Inventor's signature
Date:

same as above

October 6, 01

Full name of second inventor:
Residence:

LOHRAY, Vidya Bhushan
Cadila Healthcare Limited, Zydus Tower, Satellite
Cross Roads, Ahmedabad - 380 015, Gujarat, India
Indian

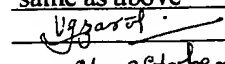
Citizenship:
Post Office Address:
Inventor's signature
Date:

same as above

01 October 2001

Full name of third inventor:
Residence:

BAROT, Vijay Kumar Gajubhai
Cadila Healthcare Limited, Zydus Tower, Satellite
Cross Roads, Ahmedabad - 380 015, Gujarat, India

Citizenship:
Post Office Address:
Inventor's signature
Date:

Indian
same as above

01 October 2001